# EXHIBIT N – PART 2

2014003807



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A. NOMBRE Y NÚMERO DE CONTACTO (opcional) / NAME & PHONE OF CONTAC	T AT FILER (optional)				
3. CORREO ELECTRÓNICO DE CONTACTO (opcional) / E-MAIL CONTACTAT FILE	R (optional)				
C. ENVIAR CONFIRMACIÓN A (Nombre y Dirección): / SEND ACKNOWLEDGMENT	TO: (Name and Address)				
Arent Fox LLP					
Attention: David Dubrow	·				
1675 Broadway					
New York, NY 10019				PARA USO DEL OFICIAL	
. NOMBRE DEL DEUDOR / DEBTOR'S NAME: Provea sólo un nom				OR FILING OFFICE USE	
componente del nombre); si algún aparte del nombre del Deudor no cabe en el rengión 10 del Anejo a la Declaración de Financiamiento (Forma abbreviate any pert of the Debtor's name); il any part of the individual Debtor's information in item 10 of the Financing Statement Addendum (Form UCC:AdPR)	en la línea 1b, déjela en bl UCC1AdPR) / Provide only s	lanco, marque aqui one Debtor name (1)	y pro	ovea la información del De	omit modify of
1a. NOMBRE DE LA ENTIDAD / ORGANIZATION'S NAME  Puerto Rico Highway and Transportation Authority	· ("Dobtor")				
Puerto Rico Highway and Transportation Authority  1b. APELLIDO / INDIVIDUAL'S SURNAME	/ ( Debtor )   Nombre / First Personal	NAME	SECUND	O NOMBRE / ADDITIONAL	Terreno
	INCOMBRET FIRST PERSONAL	L NAME	NAME	O NOMBRE / ADDITIONAL	SUFIJO /SUFFIX
DIRECCIÓN POSTAL I MAILING ADDRESS	CIUDAD / CITY			CÓDIGO POSTAL / POSTA	
Minillas Government Center, South Building, Floor 17	San Juan		STATE PR	00940	COUNTRY USA
A NOUSE DE LA PRINCIPIO DE LA					
2a. NOMBRE DE LA ENTIDAD / ORGANIZATION'S NAME  R 2b. APELLIDO / INDIVIDUAL'S SURNAME	NOMBRE / FIRST PERSONAL	L NAME		O NOMBRE / ADDITIONAL	SUFIJO
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2b. APELLIDO / INDIVIDUAL'S SURNAME  DIRECCIÓN / MAILING ADDRESS  NOMBRE DEL ACREEDOR GARANTIZADO (o NOMBRE DE CESI SECURED PARTY'S NAME (or NAME of ASSIGNEE): Provide only on 3a. NOMBRE DE LA ENTIDAD / ORGANIZATION'S NAME  Ambac Assurance Corporation ("Ambac") for benefit of ho	CIUDAD / CITY  ONARIO): Provea solo un respectatore de Secured Party name (3a)	nombre de Acreed or 3b)	NAME ESTADO STATE dor Gara	CÓDIGO POSTAL / POSTA CODE ntizado (3a o 3b)	SUFFIX L PAIS COUNTRY
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	2014002568		2014	MAY 16	AM IN:	uя
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					, 1,9	70
A. NAME & PHONE OF CONTACT AT FILER (optional)						
B. E-MAIL CONTACT AT FILER (optional)						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						24 PAGE 144 .
Cadwalader, Wickersham & Taft LLP Attention: Lary Stromfeld One World Financial Center New York, NY 10281						
L		THE ABOVE SPA	CE IS FOI	R FILING OFFIC	E USE ON	NLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact name will not fit in line 1b, leave all of item 1 blank, check here    and pro						
1a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·	nanong ota	tement Addendan	110111011	
Puerto Rico Highway and Transportatio OR 16. INDIVIDUAL'S SURNAME	n Authority FIRST PERSONAL NAME		ADDITION	VAL NAME(S)/INIT	IAI (S)	SUFFIX
IV. INDIVIDUAL S SURVANIL	FIRST PERSONAL NAME		ADDITION	OL IVANE(O)/IIVI	AL(O)	001112
1c. MAILING ADDRESS  Minillas Government Center, South Buildi	ng San Juan		STATE PR	POSTAL CODE <b>00921</b>		COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact name will not fit in line 2b, leave all of item 2 blank, check here  and pro	, full name; do not omit, modify, or a vide the Individual Debtor informati					
2a. ORGANIZATION'S NAME	Arde the Individual peptor information	of in item 10 of the Fr	nationly Sta	Marrient Addertourn	(1 01111 000	· inu)
OR OR OF THE PROPERTY OF THE P			Language			
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITION	NAL NAME(S)/INIT	IAL(S)	SUFFIX
2c. MAILING ADDRESS	СПҮ		STATE	POSTAL CODE		COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	SECURED PARTY): Provide only on	ne Secured Party nam	e (3a or 3b	)		
3a. ORGANIZATION'S NAME  Assured for the benefit of Holders of all	Bonds under the 19	68 Resoluti	on (as	defined be	low)	
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		•	NAL NAME(S)/INIT		SUFFIX
3c. MAILING ADDRESS 31 W. 52nd St., #26	New York		STATE NY	POSTAL CODE 10019		COUNTRY
4. COLLATERAL: This financing statement covers the following collaterat Pursuant to that certain Resolution 69-18 adopted and interest in and to "Revenues," which include, y gasoline tax allocated to the Debtor by Act No. 75 o Debtor's traffic facilities, including, without limitat facilities, and (b) all parking lots and similar facilities allocated to the Debtor and for which the Debto (iv) funds and accounts pledged as security for Bon Guaranty Corp. and Assured Municipal Corp. (for used herein and not otherwise defined herein will herein will herein and not otherwise defined herein will herein will herein will herein and not otherwise defined herein will here will	vithout limitation, (i) al f 1965; (ii) tolls or char ion, (a) all highway, ros ies; (iii) proceeds of any or is expressly authoriz ds and investment earn merly known as Financ	I moneys recei ges imposed b ad, thoroughfa other taxes, f ed to pledge to ings therein. ial Security A	y the Dore, species, or of the representations of the representations.	the Debtor of ebtor for the edway, bridg charges whice payment of the red" means A ce Inc.). Cap	on accou e use of a ge, and the ch the L he Bond Assured bitalized	int of any of the tunnel toll egislature ls; and
	rust (see UCC1Ad, item 17 and Ins			red by a Decedent'		
6a. Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home Transaction	A Debtor Is a Transmitt		_	f applicable and ch ural Lien	eck <u>only</u> on Non-UCC F	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor	Seller/Buyer		lee/Bailor		ee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

# Case:17-03283-LTS Doc#:10107-14 Filed:01/16/20 Entered:01/16/20 20:47:02 Desc Exhibit N2 Page 4 of 8

### Instructions for UCC Financing Statement (Form UCC1)

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions, especially Instruction 4/4/46 plane for the Debtor is crucial.

Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney; The filing office cannot give legal advice.

Send completed form and any attachments to the filing office, with the required fee.

#### **ITEM INSTRUCTIONS**

A and B. To assist filing offices that might wish to communicate with filer, filer may provide information in item A and item B. These items are optional.
 C. Complete item C if filer desires an acknowledgment sent to them. If filing in a filing office that returns an acknowledgment copy furnished by filer, present simultaneously with this form the Acknowledgment Copy or a carbon or other copy of this form for use as an acknowledgment copy.

- 1. **Debtor's name.** Carefully review applicable statutory guidance about providing the debtor's name. Enter only one Debtor name in item 1— either an organization's name (1a) or an individual's name (1b). If any part of the Individual Debtor's name will not fit in line 1b, check the box in item 1 leave all of item 1 blank, check the box in item 9 of the Financing Statement Addendum (Form UCC1Ad) and enter the Individual Debtor name in item 10 of the Financing Statement Addendum (Form UCC1Ad). Enter Debtor's correct name. Do not abbreviate words that are not already abbreviated in the Debtor's name. If a portion of the Debtor's name consists of only an initial or an abbreviation rather than a full word, enter only the abbreviation or the initial. If the collateral is held in a trust and the Debtor name is the name of the trust, enter trust name in the Organization's Name box in item 1a.
- 1a. <u>Organization Debtor Name</u>. "Organization Name" means the name of an entity that is not a natural person. A sole proprietorship is **not** an organization, even if the individual proprietor does business under a trade name. If Debtor is a registered organization (e.g., corporation, limited partnership, limited liability company), it is advisable to examine Debtor's current filed public organic records to determine Debtor's correct name. Trade name is insufficient. If a corporate ending (e.g., corporation, limited partnership, limited liability company) is part of the Debtor's name, it must be included. Do not use words that are not part of the Debtor's name.
- 1b. Individual Debtor Name. "Individual Name" means the name of a natural person; this includes the name of an individual doing business as a sole proprietorship, whether or not operating under a trade name. The term includes the name of a decedent where collateral is being administered by a personal representative of the decedent. The term does not include the name of an entity, even if it contains, as part of the entity's name, the name of an individual. Prefixes (e.g., Mr., Mrs., Ms.) and titles (e.g., M.D.) are generally not part of an individual name. Indications of lineage (e.g., Jr., Sr., III) generally are not part of the individual's name, but may be entered in the Suffix box. Enter individual Debtor's surname (family name) in Individual's Surname box, first personal name in First Personal Name box, and all additional names in Additional Name(s)/Initial(s) box.

If a Debtor's name consists of only a single word, enter that word in Individual's Surname box and leave other boxes blank.

For both <u>organization and individual Debtors</u>. Do not use Debtor's trade name, DBA, AKA, FKA, division name, etc. in place of or combined with Debtor's correct name; filer may add such other names as additional Debtors if desired (but this is neither required nor recommended).

- 1c. Enter a mailing address for the Debtor named in item 1a or 1b.
- Additional Debtor's name. If an additional Debtor is included, complete item 2, determined and formatted per Instruction 1. For additional Debtors, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP) and follow Instruction 1 for determining and formatting additional names.
- 3. Secured Party's name. Enter name and mailing address for Secured Party or Assignee who will be the Secured Party of record. For additional Secured Parties, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP). If there has been a full assignment of the initial Secured Party's right to be Secured Party of record before filing this form, either (1) enter Assignor Secured Party's name and mailing address in Item 3 of this form and file an Amendment (Form UCC3) [see Item 5 of that form]; or (2) enter Assignee's name and mailing address in Item 3 of this form and, if desired, also attach Addendum (Form UCC1Ad) giving Assignor Secured Party's name and mailing address in Item 11.
- 4. Collateral. Use item 4 to indicate the collateral covered by this financing statement. If space in item 4 is insufficient, continue the collateral description in item 12 of the Addendum (Form UCC1Ad) or attach additional page(s) and incorporate by reference in item 12 (e.g., See Exhibit A). Do not include social security numbers or other personally identifiable information.

Note: If this financing statement covers timber to be cut, covers as-extracted collateral, and/or is filed as a fixture filing, attach Addendum (Form UCC1Ad) and complete the required information in items 13, 14, 15, and 16.

- 5. If collateral is held in a trust or being administered by a decedent's personal representative, check the appropriate box in item 5. If more than one Debtor has an interest in the described collateral and the check box does not apply to the interest of all Debtors, the filer should consider filing a separate Financing Statement (Form UCC1) for each Debtor.
- 6a. If this financing statement relates to a Public-Finance Transaction, Manufactured-Home Transaction, or a Debtor is a Transmitting Utility, check the appropriate box in item 6a. If a Debtor is a Transmitting Utility <u>and</u> the initial financing statement is filed in connection with a Public-Finance Transaction or Manufactured-Home Transaction, check <u>only</u> that a Debtor is a Transmitting Utility.
- 6b. If this is an Agricultural Lien (as defined in applicable state's enactment of the Uniform Commercial Code) or if this is not a UCC security interest filing (e.g., a tax lien, judgment lien, etc.), check the appropriate box in item 6b and attach any other Items required under other law.
- 7. Alternative Designation. If filer desires (at filer's option) to use the designations lessee and lessor, consignee and consignor, seller and buyer (such as in the case of the sale of a payment intangible, promissory note, account or chattel paper), bailee and ballor, or licensee and licensor instead of Debtor and Secured Party, check the appropriate box in item 7.
- 8. Optional Filer Reference Data. This item is optional and is for filer's use only. For filer's convenience of reference, filer may enter in item 8 any identifying information that filer may find useful. Do not include social security numbers or other personally identifiable information.

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Exhibit N2 Page 5 of 8

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS	2014002500	NHSAC	REGISTRO DE CIONES COMERCIA AY 16 AN 10: 4	
A. NAME & PHONE OF CONTACT AT FILER (optional)  B. E-MAIL CONTACT AT FILER (optional)  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Cadwalader, Wickersham & Taft LLP  Attention: Lary Stromfeld	7		ڈامسو⊸ وہت ہر	ামুৰ্বাঞ্চা হৈ লগ্নাইছ
One World Financial Center New York, NY 10281			R FILING OFFICE USE O	
1a. ORGANIZATION'S NAME Puerto Rico Highway and Transportation A	ne Individual Debtor information in item 10 of the Fi			
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS Minillas Government Center, South Building	CITY San Juan	PR	POSTAL CODE 00921	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here and provide the confidence of	ame; do not omit, modify, or abbreviale any part of ne Individual Debtor information in Item 10 of the Fi			
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED 3a. ORGANIZATION'S NAME  Holders of all Bonds issued under the 1968 I  3b. INDIVIDUAL'S SURNAME		v)	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS One World Financial Center	CITY New York	STATE NY	POSTAL CODE 10281	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: Pursuant to that certain Resolution 69-18 adopted on Ji and interest in and to "Revenues," which include, with gasoline tax allocated to the Debtor by Act No. 75 of 190 Debtor's traffic facilities, including, without limitation, facilities, and (b) all parking lots and similar facilities; (has allocated to the Debtor and for which the Debtor is (iv) funds and accounts pledged as security for Bonds a not otherwise defined herein will have the meanings giv	out limitation, (i) all moneys receings; (ii) tolls or charges imposed be (a) all highway, road, thoroughfa (iii) proceeds of any other taxes, for expressly authorized to pledge to not investment earnings therein.	ived by y the D are, speces, or the rep Capita	the Debtor on accor ebtor for the use of edway, bridge, and charges which the I payment of the Bond lized terms used he	unt of any of the tunnel toll egislature ds; and

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	yer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	



## Case:17-03283-LTS Doc#:10107-14 Filed:01/16/20 Entered:01/16/20 20:47:02 Desc Exhibit N2 Page 6 of 8

### Instructions for UCC Financing Statement (Form UCC1)

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Fill in form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The filling office cannot give legal advice.

Send completed form and any attachments to the filing office, with the required fee.

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A and B. To assist filing offices that might wish to communicate with filer, filer may provide Information in item A and item B. These items are optional.
C. Complete item C if filer desires an acknowledgment sent to them. If filing in a filing office that returns an acknowledgment copy furnished by filer, present simultaneously with this form the Acknowledgment Copy or a carbon or other copy of this form for use as an acknowledgment copy.

- 1. **Debtor's name.** Carefully review applicable statutory guidance about providing the debtor's name. Enter <u>only one Debtor name in item 1 —</u> either an organization's name (1a) <u>or</u> an individual's name (1b). If any part of the Individual Debtor's name will not fit in line 1b, check the box in item 1 leave all of item 1 blank, check the box in item 9 of the Financing Statement Addendum (Form UCC1Ad) and enter the Individual Debtor name in item 10 of the Financing Statement Addendum (Form UCC1Ad). Enter Debtor's <u>correct name</u>. Do not abbreviate words that are not already abbreviated in the Debtor's name. If a portion of the Debtor's name consists of only an initial or an abbreviation rather than a full word, enter only the abbreviation or the initial. If the collateral is held in a trust and the Debtor name is the name of the trust, enter trust name in the Organization's Name box in item 1a.
- 1a. <u>Organization Debtor Name</u>. "Organization Name" means the name of an entity that is not a natural person. A sole proprietorship is **not** an organization, even if the individual proprietor does business under a trade name. If Debtor is a registered organization (e.g., corporation, limited partnership, limited liability company), it is advisable to examine Debtor's current filed public organic records to determine Debtor's correct name. Trade name is insufficient. If a corporate ending (e.g., corporation, limited partnership, limited liability company) is part of the Debtor's name, it must be included. Do not use words that are not part of the Debtor's name.
- 1b. Individual Debtor Name. "Individual Name" means the name of a natural person; this includes the name of an individual doing business as a sole proprietorship, whether or not operating under a trade name. The term includes the name of a decedent where collateral is being administered by a personal representative of the decedent. The term does not include the name of an entity, even if it contains, as part of the entity's name, the name of an individual. Prefixes (e.g., Mr., Mrs., Ms.) and titles (e.g., M.D.) are generally not part of an individual name. Indications of lineage (e.g., Jr., Sr., III) generally are not part of the individual's name, but may be entered in the Suffix box. Enter individual Debtor's sumame (family name) in Individual's Surname box, first personal name in First Personal Name box, and all additional names in Additional Name(s)/initial(s) box.

If a Debtor's name consists of only a single word, enter that word in Individual's Surname box and leave other boxes blank.

For both <u>organization and individual Debtors</u>. Do not use Debtor's trade name, DBA, AKA, FKA, division name, etc. in place of or combined with Debtor's correct name; filer may add such other names as additional Debtors if desired (but this is neither required nor recommended).

- 1c. Enter a mailing address for the Debtor named in item 1a or 1b.
- Additional Debtor's name. If an additional Debtor is included, complete item 2, determined and formatted per instruction 1. For additional Debtors, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP) and follow Instruction 1 for determining and formatting additional names.
- 3. Secured Party's name. Enter name and mailing address for Secured Party or Assignee who will be the Secured Party of record. For additional Secured Parties, attach either Addendum (Form UCC1Ad) or Additional Party (Form UCC1AP). If there has been a full assignment of the Initial Secured Party's right to be Secured Party of record before filing this form, either (1) enter Assignor Secured Party's name and mailing address in Item 3 of this form and file an Amendment (Form UCC3) [see item 5 of that form]; or (2) enter Assignee's name and mailing address in item 3 of this form and, if desired, also attach Addendum (Form UCC1Ad) giving Assignor Secured Party's name and mailing address in item 11.
- 4. Collateral. Use item 4 to indicate the collateral covered by this financing statement. If space in item 4 is insufficient, continue the collateral description in item 12 of the Addendum (Form UCC1Ad) or attach additional page(s) and incorporate by reference in item 12 (e.g., See Exhibit A). Do not include social security numbers or other personally identifiable information.

Note: If this financing statement covers timber to be cut, covers as-extracted collateral, and/or is filed as a fixture filing, attach Addendum (Form UCC1Ad) and complete the required information in items 13, 14, 15, and 16.

- 5. If collateral is held in a trust or being administered by a decedent's personal representative, check the appropriate box in item 5. If more than one Debtor has an interest in the described collateral and the check box does not apply to the interest of all Debtors, the filer should consider filing a separate Financing Statement (Form UCC1) for each Debtor.
- 6a. If this financing statement relates to a Public-Finance Transaction, Manufactured-Home Transaction, or a Debtor is a Transmitting Utility, check the appropriate box in item 6a. If a Debtor is a Transmitting Utility and the initial financing statement is filed in connection with a Public-Finance Transaction or Manufactured-Home Transaction, check only that a Debtor is a Transmitting Utility.
- 6b. If this is an Agricultural Lien (as defined in applicable state's enactment of the Uniform Commercial Code) or if this is not a UCC security interest filing (e.g., a tax lien, judgment lien, etc.), check the appropriate box in item 6b and attach any other items required under other law.
- 7. Alternative Designation. If filer desires (at filer's option) to use the designations lessee and lessor, consignee and consignor, seller and buyer (such as in the case of the sale of a payment intangible, promissory note, account or chattel paper), ballee and bailor, or licensee and licensor instead of Debtor and Secured Party, check the appropriate box in item 7.
- 8. Optional Filer Reference Data. This item is optional and is for filer's use only. For filer's convenience of reference, filer may enter in item 8 any Identifying Information that filer may find useful. Do not include social security numbers or other personally identifiable information.

# Case:17:0328371755E Doc#:10107-14 Filed:01/16/20 Entered:01/16/20 20:47:02 Desc:

Exhibit N2 Page 7 of 8

Registro de Transacciones Comerciales

#### **ENMIENDA** DECLARACIÓN DE FINANCIAMIENTO

FINANCING STATEMENT AMENDMENT

SIGA INSTRUCCIONES / FOLLOW INSTRUCTIONS

A. NOMBRE Y TELÉFONO DE PRESENTANTE (opcional) / NAME & PHONE OF CONTACT AT FILER (optional) Lcda. Marguileán Rivera Amili (787) 729-6438

B. CORREO ELECTRÓNICO DE PRESENTANTE (opcional) / E-MAIL CONTACT AT FILER (optional)

marguilean.rivera@bgfpr.com

10 DE TRANSACCIONES JUNEROIALES

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C. ENVÍE CONFIRMACIÓN A: (nombre y dirección) / SEND ACKNOWLEDGMENT TO: (Name and Address)					
Government Development Bank for Puerto Rico	$\neg$				
Att. Legal Division					
PO Box 42001 San Juan, PR 00940-2001		EL ESPACIO ARRIBA ES P THE ABOVE SPACE IS FOR			SÓLAMENTE
1a. NÚMERO DE REGISTRO DE DECLARACIÓN DE FINANCIAMIENTO INICI FINANCING STATEMENT FILE NUMBER	AL/INITIAL 1	b. Esta ENMIENDA DE presentará [para inscripc	DECLAR ión] en el	RACIÓN DE FINANCIA REGISTRO DE LA PROF NDMENT is to be filed (	MIENTO se PIEDAD / This
2013004677		recorded) in the REAL of Presentante: <u>aneie</u> Aneio nombre del Deudor en el r	E <i>STATE F</i> o de Enmi englón 13	RECORDS enda (Forma UCC3AdPR n (Form UCC3Ad) <u>and</u> pr	) y provea el
<ol> <li>TERMINACIÓN: La efectividad de la Declaración de colateral del Acreedor Garantizado que autoriza esta Dec identified above is terminated with respect to the security interes</li> </ol>	laración de	Terminación / TERMINATI	ON: Effe	ctiveness of the Financia	
<ol> <li>CESIÓN (total o parcial): Provea nombre del Cesionario en</li> <li>Para cesión parcial, complete rengión 7 y 9 y también in name of Assignee in item 7a or 7b, and address of Assignee in it also indicate affected collateral in item 8</li> </ol>	dique la cola	eral afectada en el rengión	8 / ASS	SIGNMENT (full or part	tial): Provide
4. CONTINUACIÓN: La efectividad de la Declaración de Financiam autoriza esta Declaración de Continuación se continúa por el period identified above with respect to the security interest(s) of Secu- provided by law	o adicional pro	visto por ley / CONTINUATION	ON: Effe	ctiveness of the Financi	ng Statement
5. CAMBIO DE INFORMACIÓN DE PARTE: PARTY INFORM			- ok one of	these three bever	
CAN			OCK <u>ONE</u> OF SUE nombre: C 7a o 7b, <u>y</u> ren	omplete Elimine nombre: Pr	rovea nombre a ser ón 6a o 6b
Este Cambio afecta Deudor o Acreedor Garantizado de record CH/This Change affects Debtor or Secured Party of record 65;	WGE name and/or a and item 7a or 7b <u>and</u>	idress: Complete item 6a or ADD na	me: Complete o, <u>and</u> item 7c	item DELETE name: G to be deleted in ite	ive record name m 6a or 6b
6. INFORMACIÓN ACTUAL DE EXPEDIENTE: Complete para Cambio de Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)  6a. NOMBRE DE ENTIDAD / ORGANIZATION'S NAME	Información de	Parte – provea sólo <u>un</u> nombre (é	Sa o 6b) / C	CURRENT RECORD INFO	ORMATION:
OR 6b. APELLIDO / INDIVIDUAL'S SURNAME	NOMBRE / FIR	ST PERSONAL NAME	SEGUNDO NAME	O NOMBRE / ADDITIONAL	SUFIJO SUFFIX
<ol> <li>INFORMACIÓN CAMBIADA O AGREGADA: Complete para Cesión c Can modifique o abrevie n iniguna parte del nombre del Deudor) / CHANGED OR Al full mane; do not omit, modify, or abbrevate any part of the Debtor's name)</li> <li>NOMBRE DE ENTIDAD / ORGANIZATION'S NAME</li> </ol>	nbio de Informaci DDED INFORM	ón de Parte – provea solo <u>un</u> nom IATION: Complete for Assignment or Pe	ore (7a o 7t orty Information	o) (use nombre completo y e. Change - provide only <u>one</u> name (7	kacto; no omita, a or 7b) (use exact,
OR 7b. APELLIDO / INDIVIDUAL'S SURNAME					
NOMBRE / INDIVIDUAL'S FIRST PERSONAL NAME					
SEGUNDO NOMBRE / INDIVIDUAL'S ADDITIONAL NAME					SUFIJO SUFFIX
7c. DIRECCIÓN POSTAL / MAILING ADDRESS	CIUDAD / C/TY			CÓDIGO POSTAL POSTAL CODE	PAÍS COUNTRY
8. CAMBIO DE COLATERAL: También marque <u>una</u> de las cuetro alternativas: AG  COLLATERAL CHANGE: Also check one of these four boxes:	REGA colateral D collateral	ELIMINA colateral  DELETE collateral	REFORMUL RESTATE &		DE colateral SSIGN collateral
Indique colateral: / Indicate collateral: Pursuant to the Loan Agreement and the Assignment time to time, and executed between the Debtor and So to the Puerto Rico Highways and Transportation Authorism Commonwealth of Puerto Rico on June 25, 2013, which bonds of the PRHTA issued pursuant to (i) Resolution I (ii) Resolution No. 13-41, adopted by the PRHTA on Au	ecured Party ority ("PRH1 h shall be ju No. 98-06, a	herein, this Financing S A") by Acts No. 30 and 3 nior, inferior and subord dopted by the PRHTA on	tatemer 1 approv linate in	nt covers all revenue ved by the Legislatur all respects to the or	s allocated re of the utstanding
9. NOMBRE DE ACREEDOR GARANTIZADO EN REC Cedente, si es una Cesión) Si esto es una Enmiende autorizada por el Deudor, m NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS Amendment authorized by a DEBTOR, check here and provide name oi auth	arque aquí <b>√</b> y AMENDMENT	provea el nombre del Deudor autor	zznte		_ 12 2
9a. NOMBRE DE ENTIDAD / ORGANIZATION'S NAME Government Development Bank for Puerto Rico (GDB	)				
OR 9b. APELLIDO / INDIVIDUAL'S SURNAME		ST PERSONAL NAME	SEGUNDO NAME	NOMBRE / ADDITIONAL	SUFIJO SUFFIX
10. DATOS OPCIONALES DE REFERENCIA PARA PRESENTANTE: / OPT/ONA	L FILER REFE	RENCE DATA			

#### 2002010928

DEPARTAMENTO DE ESTADO GOBIERNO DE PUERTO RICO DECLARACION DE FINANCIAMIENTO

PINANCIAN STATEMENT
Two de segur cildadosamente las instrucciones indicadas al dono de esta forna.
Please follow carefully the instructions indicaded on the reverse elda of this form.

Reservado para el oticial de arcibiro Reservad for the Illing officer

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